

KANSAS REAL ESTATE COMMISSION

Three Townsite Plaza
120 SE 6th Avenue, Suite 200
Topeka, Kansas 66603-3511
www.krec.ks.gov (785)296-3411
Fax: (785)296-1771 krec@ks.gov

CHANGE
(Active or Inactive)
REL-310

This form is fillable online

DEACTIVATION (Change to Inactive Status)	
Name	License Number
Status	Action Required
☐ I am placing my license on inactive status. I understand I must continue to renew my license in order to avoid its expiration. ■ Update my email address to:	Fee \$0.00. Complete Company Info on Page 2 and secure signatures of Licensee and Supervising/Branch Broker. Return the Orginial wall license to KREC. Alternatively, email or fax the License to KREC marked "Cancelled" and signed and dated by the Supervising/Branch. (File Reactivation within 2 years to avoid additional education and exam requirements.)
*********	*******************
REACTIVATION (Change to Active Status)	
Name	License Number
Please answer the following:	Action Required
☐ I am Reactivating my license • Update my email address to:	Fee \$15.00- Complete Credit Card form attached or submit check or money order payable to KREC. Continuing Education on record for immediate past renewal date. If on inactive 2 or more years, six hours for each full year of inactive status. If on inactive status 5 or more years, re-take the licensure exam in addition to the CE hours and attach a copy of the passing score report.
1. Since the issuance of your license or your last renewal, whichever is more recent, have you been convicted of any misdemeanor or felony offense, or received a diversion or suspended imposition of sentence for a misdemeanor or felony, or is there any misdemeanor or felony charge(s) now pending against you?	If "yes", fill in the blanks below and the Explanation section on page 2. Date: Offense: Court Location: Case No: Unless previously submitted, include copies of the ticket, conviction or sentencing order, diversion agreement, probation order, and release from probation or diversion. (attach supplemental sheets if needed)
2. Since the issuance of your license or your last renewal, whichever is more recent, except for disciplinary action against your license by KREC, has there been a denial, revocation, suspension, voluntary surrender, or any other disciplinary action taken by the State of Kansas or any other jurisdiction against any professional or occupational license held by you?	YES NO If "yes" fill in the blanks below and the Explanation section on page 2. Jurisdiction: Discipline Dates: Unless previously submitted, attach a copy of disciplinary order. (attach supplemental sheets if needed)
3. Have you performed any activities requiring a real estate license in Kansas since the date your license was changed to Inactive status?	If "yes", fill in the explanation section on page 2. Describe your activities, including all listings, pending and closed tranactions. Include the date of the listing, the date of the contract, the names of the parties to the contract, and the status of the transaction.

(attach supplemental sheets if needed)



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EXPLANATI	ION SECTION - For	"YES" answers to	Reactivation Question	ons 1, 2, or 3		
		or Deactivation f	from, or Reactivatio		Transkina Marra	
Company Nai	me		Company Num	iber	Franchise Name	
Address line	1					
Address line 2	2					
City		State	Zip	County		
SIGNATURE Note: In lieu o	SIGNATURE of the licensee signature	above, a copy of the	correspondence sent to t	the licensee info	DATE SIGNED orming them of deactivated statu	us may b
	NG BROKER SIGNA ill no longer act as super		ivating a license for the above named lice	ensee		
SIGNATURE					DATE SIGNED	
I hereby accept NOTE: If the lice Commission states	t the responsibilities of socensee holds a Restrict e	upervising/branch bro ed license and if the restriction Order and	are willing to supervise t	l licensee. osed new broke	r must include a letter or email to a Restricted basis. If approved,	
SIGNATURE					DATE SIGNED	
	Initials:	С	OMMISSION USE ONLY	,		l
	Date Entered:	Fee: \$	Deposit Date:		Notes:	



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CREDIT CARD PAYMENT INFORMATION

FOR REACTIVATION ONLY (change to Active status)

\$15.00 reactivation fee plus **\$0.38** credit card processing fee

Licensee Name:	Card Holder: (if different than licensee)		Email Address: (optional/for electronic receipt)			
Card Number:	Expiration Date:			Zip Code:		
Card Type:						
☐ Visa	MasterCard		America	n Express		Discover

Submit to the Kansas Real Estate Commission by:

Email: krec@ks.gov or Fax: 785-296-1771

After processing your payment, this document will be shredded.

If you prefer to provide your credit card information by phone, call 785-296-3411.